

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**NORTHERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

☐ Chapter 7☐ Chapter 11☐ Chapter 12☒ Chapter 13☐ Check if this is an amended filing

## Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<b>1. Your full name</b>  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	<b>Philip</b> First Name  <b>Don</b> Middle Name  <b>Lovell</b> Last Name  Suffix (Sr., Jr., II, III)	<b>Rhonda</b> First Name  <b>L</b> Middle Name  <b>Lovell</b> Last Name  Suffix (Sr., Jr., II, III)
<b>2. All other names you have used in the last 8 years</b>  Include your married or maiden names.	First Name  Middle Name  Last Name	First Name  Middle Name  Last Name
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	<b>xxx - xx - 1 8 8 0</b> OR <b>9xx - xx -</b>	<b>xxx - xx - 5 4 5 8</b> OR <b>9xx - xx -</b>
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b>  Include trade names and doing business as names	<input checked="" type="checkbox"/> I have not used any business names or EINs.  Business name  Business name  Business name	<input checked="" type="checkbox"/> I have not used any business names or EINs.  Business name  Business name  Business name

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**About Debtor 1:**

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**About Debtor 2 (Spouse Only in a Joint Case):**

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**5. Where you live**

**1623 S HWY 205**

Number Street

**Rockwall TX 75032**

City State ZIP Code

**Rockwall**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

Number Street

City State ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

*Check one:* (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7

☐ Chapter 11

☐ Chapter 12

☒ Chapter 13

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**8. How you will pay the fee**

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**☒ No☐ Yes.District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYYDistrict \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYYDistrict \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**☒ No☐ Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known**11. Do you rent your residence?**☒ No. Go to line 12.☐ Yes. Has your landlord obtained an eviction judgment against you?☐ No. Go to line 12.☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

### Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?
- ☒ No. Go to Part 4.  
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
 Name of business, if any

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- ☒ No. I am not filing under Chapter 11.  
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.  
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

### Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No  
☐ Yes. What is the hazard?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

If immediate attention is needed, why is it needed?

Where is the property?

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 ZIP Code

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

- 16. What kind of debts do you have?**
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.  
☒ Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.  
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
- 
- 17. Are you filing under Chapter 7?**
- ☒ No. I am not filing under Chapter 7. Go to line 18.
- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No  
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |
- 19. How much do you estimate your assets to be worth?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
- 20. How much do you estimate your liabilities to be?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Philip Don Lovell**

Philip Don Lovell, Debtor 1

Executed on **04/06/2020**

MM / DD / YYYY

**X /s/ Rhonda L Lovell**

Rhonda L Lovell, Debtor 2

Executed on **04/06/2020**

MM / DD / YYYY

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X /s/ Marcus Leinart**

Date **04/06/2020**

Signature of Attorney for Debtor

MM / DD / YYYY

**Marcus Leinart**

Printed name

**Leinart Law Firm**

Firm Name

**10670 N Central Expwy**

Number Street

**Suite 320**

**Dallas**

City

**TX**

State

**75231**

ZIP Code

Contact phone **(469) 232-3328**

Email address \_\_\_\_\_

**00794156**

Bar number

**TX**

State

**Fill in this information to identify your case and this filing:**

Debtor 1	<b>Philip</b> First Name	<b>Don</b> Middle Name	<b>Lovell</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b> First Name	<b>L</b> Middle Name	<b>Lovell</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known) _____			

☐ Check if this is an amended filing

## Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1.

**1623 S HWY 205**

Street address, if available, or other description

**Rockwall**      **TX**      **75032**  
City                      State      ZIP Code

**Rockwall**  
County

**1623 S HWY 205 Rockwall, TX 75032**  
**Single Family Residence**

**What is the property?**

Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local  
property identification number: **64474**

Do not deduct secured claims or exemptions. Put the  
amount of any secured claims on *Schedule D:*  
*Creditors Who Have Claims Secured by Property.*

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<b>\$245,240.00</b>	<b>\$245,240.00</b>

**Describe the nature of your ownership  
interest (such as fee simple, tenancy by the  
entireties, or a life estate), if known.**

**Fee Simple**

☒ **Check if this is community property**  
(see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any  
entries for pages you have attached for Part 1. Write that number here.....**

**\$245,240.00**



Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**☐ No☒ Yes

3.1.		<b>Who has an interest in the property?</b>	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<b>Ford</b>	Check one.		
Model:	<b>F350</b>	<input type="checkbox"/> Debtor 1 only	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
Year:	<b>2001</b>	<input type="checkbox"/> Debtor 2 only		
Approximate mileage:	_____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<b>\$4,000.00</b>	<b>\$4,000.00</b>
Other information:	_____	<input type="checkbox"/> At least one of the debtors and another		
<b>2001 Ford F350</b>		<input checked="" type="checkbox"/> Check if this is community property (see instructions)		
3.2.		<b>Who has an interest in the property?</b>	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<b>Chevrolet</b>	Check one.		
Model:	<b>1/2 Ton Pickup</b>	<input type="checkbox"/> Debtor 1 only	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
Year:	<b>1997</b>	<input type="checkbox"/> Debtor 2 only		
Approximate mileage:	_____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<b>\$1,200.00</b>	<b>\$1,200.00</b>
Other information:	_____	<input type="checkbox"/> At least one of the debtors and another		
<b>1997 Chevrolet 1/2 Ton Pickup</b>		<input checked="" type="checkbox"/> Check if this is community property (see instructions)		

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*☒ No☐ Yes**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any****entries for pages you have attached for Part 2. Write that number here.....** →**\$5,200.00****Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples: Major appliances, furniture, linens, china, kitchenware*☐ No☒ Yes. Describe.....**See continuation page(s).****\$3,235.00****7. Electronics***Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games*☐ No☒ Yes. Describe.....**See continuation page(s).****\$1,020.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe..... **See continuation page(s).** **\$520.00**

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe..... \_\_\_\_\_

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe..... **See continuation page(s).** **\$2,400.00**

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe..... **See continuation page(s).** **\$300.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... **See continuation page(s).** **\$1,050.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe..... **2 Dogs** **\$20.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information..... \_\_\_\_\_

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →**

**\$8,545.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes..... Cash: \_\_\_\_\_

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1. Checking account:	<b>Checking account-MACU</b>	<b>\$6.00</b>
17.2. Checking account:	<b>Checking account-AB</b>	<b>\$1,000.00</b>
17.3. Savings account:	<b>Savings account-MACU</b>	<b>\$0.15</b>

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them..... Name of entity: % of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them..... Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:	<b>401(k)</b>	<b>\$3,001.54</b>
401(k) or similar plan:	<b>401(k)</b>	<b>\$553.46</b>
Retirement account:	<b>Retirement account-Profit Sharing</b>	<b>\$3,663.79</b>

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes..... Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;***Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*☒ No☐ Yes. Give specific information about them**27. Licenses, franchises, and other general intangibles***Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*☒ No☐ Yes. Give specific information about them**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \_\_\_\_\_

State: \_\_\_\_\_

Local: \_\_\_\_\_

**29. Family support***Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement*☒ No☐ Yes. Give specific information

Alimony: \_\_\_\_\_

Maintenance: \_\_\_\_\_

Support: \_\_\_\_\_

Divorce settlement: \_\_\_\_\_

Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you***Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else*☒ No☐ Yes. Give specific information**31. Interests in insurance policies***Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance*☐ No☒ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

**Woodman of the World Life Ins****\$500.00****32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No☐ Yes. Give specific information**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples: Accidents, employment disputes, insurance claims, or rights to sue*☒ No☐ Yes. Describe each claim.....

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$8,724.94****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe..**39. Office equipment, furnishings, and supplies**

*Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices*

☒ No☐ Yes. Describe..**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☐ No☒ Yes. Describe..**Welding Machine****\$1,500.00****41. Inventory**☒ No☐ Yes. Describe..**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe..... Name of entity:

% of ownership:

**43. Customer lists, mailing lists, or other compilations**☒ No☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe....

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**44. Any business-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....****\$1,500.00**
**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
 If you own or have an interest in farmland, list it in Part 1.
**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**47. Farm animals***Examples: Livestock, poultry, farm-raised fish*

- ☒ No  
☐ Yes....

**48. Crops--either growing or harvested**

- ☒ No  
☐ Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes....

**50. Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes....

**51. Any farm- and commercial fishing-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....****\$0.00**
**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**
**53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*

- ☒ No  
☐ Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....****\$0.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	<u>\$245,240.00</u>
56. Part 2: Total vehicles, line 5	<u>\$5,200.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$8,545.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$8,724.94</u>	
59. Part 5: Total business-related property, line 45	<u>\$1,500.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>+\$0.00</u>	
62. Total personal property. Add lines 56 through 61.....	<u>\$23,969.94</u>	Copy personal property total → <u>+\$23,969.94</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<u>\$269,209.94</u>

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

6. Household goods and furnishings (details):

Couch	\$500.00
Chair	\$400.00
Recliner	\$400.00
Lamps	\$50.00
Coffee Table	\$50.00
End Table	\$40.00
Dining Table	\$150.00
China Cabinet	\$100.00
Dishes	\$60.00
Pots/Pans	\$30.00
Small Appliances	\$300.00
Refrigerator	\$200.00
Washing Machine/Dryer	\$200.00
Dishwasher	\$50.00
Stove/Oven	\$100.00
Microwave	\$50.00
Freezer	\$75.00
Bed	\$200.00
Dresser	\$100.00
Nigh Table	\$100.00
Mirror	\$30.00
Lawn Mower	\$50.00

7. Electronics (details):

Television	\$500.00
DVD Player	\$60.00
Speakers	\$20.00
Camera	\$50.00
Video Camera	\$40.00
Computer	\$300.00
Printer	\$50.00

8. Collectibles of value (details):

Books	\$200.00
Pictures	\$20.00
CDs	\$50.00



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

<b>DVDs</b>	<b>\$250.00</b>
<b>10. Firearms (details):</b>	
<b>22 Rifle</b>	<b>\$300.00</b>
<b>45 Pistol</b>	<b>\$300.00</b>
<b>AR.15</b>	<b>\$300.00</b>
<b>30.06</b>	<b>\$300.00</b>
<b>300 Win Mag</b>	<b>\$300.00</b>
<b>308 Rifle</b>	<b>\$300.00</b>
<b>12ga shotgun</b>	<b>\$300.00</b>
<b>16ga shotgun</b>	<b>\$300.00</b>
<b>11. Clothes (details):</b>	
<b>Clothes</b>	<b>\$200.00</b>
<b>Shoes</b>	<b>\$100.00</b>
<b>12. Jewelry (details):</b>	
<b>His Wedding Band</b>	<b>\$150.00</b>
<b>Her Wedding Band</b>	<b>\$250.00</b>
<b>3 Watches</b>	<b>\$100.00</b>
<b>Earrings</b>	<b>\$100.00</b>
<b>3 Rings</b>	<b>\$400.00</b>
<b>Costume Jewlery</b>	<b>\$50.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b>	<b>Don</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
Debtor 2	<b>Rhonda</b>	<b>L</b>	<b>Lovell</b>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  <i>Check only one box for each exemption</i>	Specific laws that allow exemption
Brief description: <b>1623 S HWY 205 Rockwall, TX 75032</b> <b>Single Family Residence</b> <b>Parcel: 64474</b> Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$245,240.00</u>	<input checked="" type="checkbox"/> <u>\$100,596.76</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Brief description: <b>2001 Ford F350</b> Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <u>\$4,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)
Brief description: <b>1997 Chevrolet 1/2 Ton Pickup</b> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$1,200.00</u>	<input checked="" type="checkbox"/> <u>\$1,200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Couch</b>  Line from Schedule A/B: <u>6</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Chair</b>  Line from Schedule A/B: <u>6</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Recliner</b>  Line from Schedule A/B: <u>6</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Lamps</b>  Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Coffee Table</b>  Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>End Table</b>  Line from Schedule A/B: <u>6</u>	<u>\$40.00</u>	<input checked="" type="checkbox"/> <u>\$40.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Dining Table</b>  Line from Schedule A/B: <u>6</u>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>China Cabinet</b>  Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Dishes</b>  Line from Schedule A/B: <u>6</u>	<u>\$60.00</u>	<input checked="" type="checkbox"/> <u>\$60.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Pots/Pans</b> Line from Schedule A/B: <u>6</u>	<u>\$30.00</u>	<input checked="" type="checkbox"/> <u>\$30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Small Appliances</b> Line from Schedule A/B: <u>6</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Refrigerator</b> Line from Schedule A/B: <u>6</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Washing Machine/Dryer</b> Line from Schedule A/B: <u>6</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Dishwasher</b> Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Stove/Oven</b> Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Microwave</b> Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Freezer</b> Line from Schedule A/B: <u>6</u>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Bed</b> Line from Schedule A/B: <u>6</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Dresser</b>  Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Nigh Table</b>  Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Mirror</b>  Line from Schedule A/B: <u>6</u>	<u>\$30.00</u>	<input checked="" type="checkbox"/> <u>\$30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Lawn Mower</b>  Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Television</b>  Line from Schedule A/B: <u>7</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>DVD Player</b>  Line from Schedule A/B: <u>7</u>	<u>\$60.00</u>	<input checked="" type="checkbox"/> <u>\$60.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Speakers</b>  Line from Schedule A/B: <u>7</u>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Camera</b>  Line from Schedule A/B: <u>7</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Video Camera</b>  Line from Schedule A/B: <u>7</u>	<u>\$40.00</u>	<input checked="" type="checkbox"/> <u>\$40.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Computer</b> Line from Schedule A/B: <u>7</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Printer</b> Line from Schedule A/B: <u>7</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Books</b> Line from Schedule A/B: <u>8</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>Pictures</b> Line from Schedule A/B: <u>8</u>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>CDs</b> Line from Schedule A/B: <u>8</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>DVDs</b> Line from Schedule A/B: <u>8</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <u>\$250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: <b>22 Rifle</b> Line from Schedule A/B: <u>10</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(7)
Brief description: <b>45 Pistol</b> Line from Schedule A/B: <u>10</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(7)
Brief description: <b>Clothes</b> Line from Schedule A/B: <u>11</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>Shoes</b> Line from Schedule A/B: <u>11</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Brief description: <b>His Wedding Band</b> Line from Schedule A/B: <u>12</u>	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>Her Wedding Band</b> Line from Schedule A/B: <u>12</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <u>\$250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>3 Watches</b> Line from Schedule A/B: <u>12</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>Earrings</b> Line from Schedule A/B: <u>12</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>3 Rings</b> Line from Schedule A/B: <u>12</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>Costume Jewelry</b> Line from Schedule A/B: <u>12</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: <b>2 Dogs</b> Line from Schedule A/B: <u>13</u>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)
Brief description: <b>Retirement account-Profit Sharing</b> Line from Schedule A/B: <u>21</u>	<u>\$3,663.79</u>	<input checked="" type="checkbox"/> <u>\$3,663.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.0021

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: <b>401(k)</b> Line from <i>Schedule A/B</i> : <u>21</u>	<u>\$3,001.54</u>	<input checked="" type="checkbox"/> <u>\$3,001.54</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.0021
Brief description: <b>401(k)</b> Line from <i>Schedule A/B</i> : <u>21</u>	<u>\$553.46</u>	<input checked="" type="checkbox"/> <u>\$553.46</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.0021
Brief description: <b>Woodman of the World Life Ins</b> Line from <i>Schedule A/B</i> : <u>31</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Ins. Code §§ 1108.001, 1108.051
Brief description: <b>Welding Machine</b> Line from <i>Schedule A/B</i> : <u>40</u>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

IN RE: **Philip Don Lovell  
Rhonda L Lovell**

CASE NO

CHAPTER **13**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$245,240.00	\$144,643.24	\$100,596.76	\$100,596.76	\$0.00
3.	Motor vehicles (cars, etc.)	\$5,200.00	\$0.00	\$5,200.00	\$5,200.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$3,235.00	\$0.00	\$3,235.00	\$3,235.00	\$0.00
7.	Electronics	\$1,020.00	\$0.00	\$1,020.00	\$1,020.00	\$0.00
8.	Collectibles of value	\$520.00	\$0.00	\$520.00	\$520.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$2,400.00	\$0.00	\$2,400.00	\$600.00	\$1,800.00
11.	Clothes	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
12.	Jewelry	\$1,050.00	\$0.00	\$1,050.00	\$1,050.00	\$0.00
13.	Non-farm animals	\$20.00	\$0.00	\$20.00	\$20.00	\$0.00
14.	Unlisted pers. and household items- incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$1,006.15	\$0.00	\$1,006.15	\$0.00	\$1,006.15
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$7,218.79	\$0.00	\$7,218.79	\$7,218.79	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

IN RE: **Philip Don Lovell  
Rhonda L Lovell**

CASE NO

CHAPTER **13**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 1*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$500.00	\$0.00	\$500.00	\$500.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$1,500.00	\$0.00	\$1,500.00	\$1,500.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops--either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$269,209.94</b>	<b>\$144,643.24</b>	<b>\$124,566.70</b>	<b>\$121,760.55</b>	<b>\$2,806.15</b>

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

IN RE: **Philip Don Lovell**  
**Rhonda L Lovell**

CASE NO

CHAPTER **13**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 2*

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
<b><u>Real Property</u></b>			
(None)			
<b><u>Personal Property</u></b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-Exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b><u>Real Property</u></b>				
(None)				
<b><u>Personal Property</u></b>				
AR.15	\$300.00		\$300.00	\$300.00
30.06	\$300.00		\$300.00	\$300.00
300 Win Mag	\$300.00		\$300.00	\$300.00
308 Rifle	\$300.00		\$300.00	\$300.00
12ga shotgun	\$300.00		\$300.00	\$300.00
16ga shotgun	\$300.00		\$300.00	\$300.00
Checking account-MACU	\$6.00		\$6.00	\$6.00
Savings account-MACU	\$0.15		\$0.15	\$0.15
Checking account-AB	\$1,000.00		\$1,000.00	\$1,000.00
<b>TOTALS:</b>	<b>\$2,806.15</b>	<b>\$0.00</b>	<b>\$2,806.15</b>	<b>\$2,806.15</b>

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

IN RE: **Philip Don Lovell**  
**Rhonda L Lovell**

CASE NO

CHAPTER 13

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet # 3*

<b>Summary</b>	
A. Gross Property Value (not including surrendered property)	<b>\$269,209.94</b>
B. Gross Property Value of Surrendered Property	<b>\$0.00</b>
C. Total Gross Property Value (A+B)	<b>\$269,209.94</b>
D. Gross Amount of Encumbrances (not including surrendered property)	<b>\$144,643.24</b>
E. Gross Amount of Encumbrances on Surrendered Property	<b>\$0.00</b>
F. Total Gross Encumbrances (D+E)	<b>\$144,643.24</b>
G. Total Equity (not including surrendered property) / (A-D)	<b>\$124,566.70</b>
H. Total Equity in surrendered items (B-E)	<b>\$0.00</b>
I. Total Equity (C-F)	<b>\$124,566.70</b>
J. Total Exemptions Claimed	<b>\$121,760.55</b>
K. Total Non-Exempt Property Remaining (G-J)	<b>\$2,806.15</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b> First Name	<b>Don</b> Middle Name	<b>Lovell</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b> First Name	<b>L</b> Middle Name	<b>Lovell</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

*Column A*  
**Amount of claim**  
Do not deduct the value of collateral

*Column B*  
**Value of collateral that supports this claim**

*Column C*  
**Unsecured portion**  
If any

2.1	Describe the property that secures the claim:	<b>\$141,476.64</b>	<b>\$245,240.00</b>	
Mr. Cooper Creditor's name Attn: Bankruptcy Number Street 8950 Cypress Waters Blvd	1623 S HWY 205 Rockwall, TX 75032			
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply.				
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset)				
<b>Conventional Real Estate Mortgage</b>				
Who owes the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input checked="" type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred	07/2013	Last 4 digits of account number	9 7 2 7	
Post Petition Mortgage Payments				

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$141,476.64**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.2	Describe the property that secures the claim:	\$9,842.48	\$245,240.00	
<b>Mr. Cooper</b> Creditor's name <b>Attn: Bankruptcy</b> Number Street <b>8950 Cypress Waters Blvd</b>				
<b>Coppell TX 75019</b> City State ZIP Code				
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Mortgage arrears</b>				
Date debt was incurred <u>Various</u> Last 4 digits of account number <u>9 7 2 7</u>				

## Pre petition mortgage paymnets

2.3	Describe the property that secures the claim:	\$3,018.10	\$245,240.00	
<b>Mr. Cooper</b> Creditor's name <b>Attn: Bankruptcy</b> Number Street <b>8950 Cypress Waters Blvd</b>				
<b>Coppell TX 75019</b> City State ZIP Code				
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Mortgage arrears</b>				
Date debt was incurred <u>Various</u> Last 4 digits of account number <u>9 7 2 7</u>				

## Gap Conduit Mortgage Payments

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$12,860.58**

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.4	Describe the property that secures the claim:	\$3,166.60	\$245,240.00	
-----	---	------------	--------------	--

**Rockwall County Tax Accessor**

Creditor's name

**841 Justin Road**

Number Street

**1623 S HWY 205 Rockwall, TX 75032****Rockwall TX 75087-4842**

City

State

ZIP Code

**Who owes the debt?** Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates to a community debt****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)**Property Tax**Date debt was incurred **1/1/2019**Last 4 digits of account number **4 4 7 4****Pay Direct-Escrowed**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$3,166.60**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$157,503.82**

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b>	<b>Don</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b>	<b>L</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.  
☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
<div style="border: 1px solid black; padding: 2px; display: inline-block;">2.1</div> <b>Internal Revenue Service</b> Priority Creditor's Name <b>Centralized Insolvency Operations</b> Number Street <b>PO Box 7346</b>  <b>Philadelphia PA 19101-7346</b> City State ZIP Code	<b>\$2,742.06</b>	<b>\$2,742.06</b>	<b>\$0.00</b>

**Last 4 digits of account number** \_\_\_\_\_

**When was the debt incurred?** 12/31/2016

**As of the date you file, the claim is:** Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of PRIORITY unsecured claim:**

☐ Domestic support obligations  
☒ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

**Who incurred the debt?** Check one.

☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

☒ No  
☐ Yes

**in plan**



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
<b>\$3,700.00</b>	<b>\$3,700.00</b>	<b>\$0.00</b>

2.2

**Leinart Law Firm**

Priority Creditor's Name

**11520 N. Central Expressway**

Number Street

**Suite 212****Dallas****TX****75243**

City

State

ZIP Code

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? **03/26/2020**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☒ Other. Specify

**Attorney fees for this case**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**\$0.00**

4.1

**Capital One**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 30285**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** 1 2 6 9

**When was the debt incurred?** 09/2013

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Credit Card**

4.2

**Capital One Auto Finance**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 30285**

**Salt Lake City**

**UT**

**84130**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Last 4 digits of account number** 1 0 0 1

**When was the debt incurred?** 08/2013

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Repo Deficiency**

**\$1,441.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.3

**\$0.00****Chase Mortgage**

Nonpriority Creditor's Name

**Chase Records Center/Attn: Correspondenc**

Number Street

**Mail Code LA4 5555 700 Kansas Ln****Monroe****LA****71203**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **9 6 3 4**When was the debt incurred? **07/03/2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Conventional Real Estate Mortgage**

4.4

**\$0.00****Chase Mortgage**

Nonpriority Creditor's Name

**Chase Records Center/Attn: Correspondenc**

Number Street

**Mail Code LA4 5555 700 Kansas Ln****Monroe****LA****71203**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **1 7 8 4**When was the debt incurred? **02/2006**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Conventional Real Estate Mortgage**

4.5

**\$3,874.03****Client Services Inc**

Nonpriority Creditor's Name

**3451 Harry Thurman Blvd**

Number Street

**St Charles****MO****63301-4047**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4 4 3 1**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Collecting for - Capital one Bank**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.6

**\$0.00****Community Bank**

Nonpriority Creditor's Name

**500 S Morgan St**

Number Street

Last 4 digits of account number 8 2 0 8When was the debt incurred? 08/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Granbury****TX****76048**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Automobile**

4.7

**\$0.00****Community Bank**

Nonpriority Creditor's Name

**500 S Morgan St**

Number Street

Last 4 digits of account number 6 7 0 1When was the debt incurred? 06/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Granbury****TX****76048**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Installment Loan**

4.8

**\$0.00****Community Bank**

Nonpriority Creditor's Name

**500 S Morgan St**

Number Street

Last 4 digits of account number 8 3 0 1When was the debt incurred? 02/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Granbury****TX****76048**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Installment Loan**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9

\$0.00**Community Bank**

Nonpriority Creditor's Name

**500 S Morgan St**

Number Street

Last 4 digits of account number 2 7 3 4When was the debt incurred? 06/2010

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Granbury****TX****76048**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Installment Loan**

4.10

\$0.00**Community Bank**

Nonpriority Creditor's Name

**500 S Morgan St**

Number Street

Last 4 digits of account number 4 1 0 3When was the debt incurred? 12/2009

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Granbury****TX****76048**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Installment Loan**

4.11

\$0.00**Computer Credit Inc.**

Nonpriority Creditor's Name

**640 West Fourth Street**

Number Street

Last 4 digits of account number 9 7 4 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Winston Salem****NC****27113**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Collecting for - Prebyterian of Rockwall**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.12****\$0.00****Credit Collection Services**

Nonpriority Creditor's Name

**725 Canton St.**

Number Street

**Norwood****MA****02062**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **1 0 8 3**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Collecting for - Quest Diagnostic****4.13****\$58.00****Credit Management, LP**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 118288****Carrollton****TX****75011**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **0 7 7 6**When was the debt incurred? **12/2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Original Creditor Name: LAKEPOINT RADIOLOGY ASSOC****4.14****\$57.00****Credit Management, LP**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 118288****Carrollton****TX****75011**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **7 6 2 8**When was the debt incurred? **03/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Original Creditor Name: LAKEPOINT RADIOLOGY ASSOC**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.15

**\$129.00****Credit Systems International, Inc**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1088****Arlington****TX****76004**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 5 0 8 3When was the debt incurred? 08/2019

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Original Creditor Name: TX HEALTH PHYSICIANS GROUP**

4.16

**\$535.00****Denville Mgmt**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1987****Colleyville****TX****76034**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 7 6 N 1When was the debt incurred? 03/23/2018

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Original Creditor Name: 01 REGIONAL**

4.17

**\$100.00****Digestive Health Associates of Texas**

Nonpriority Creditor's Name

**7610 Stemmons Freeway**

Number Street

**Suite 500****Dallas****TX****75247-4251**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 3 4 6 3

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Medical**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.18

\$0.00**Fingerhut**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1250**Last 4 digits of account number 7 9 7 3When was the debt incurred? 04/2007

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Saint Cloud****MN 56395**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account**\$1,798.94

4.19

**Good Shepard Healthcare**

Nonpriority Creditor's Name

**610 NW 11th St.**

Number Street

Last 4 digits of account number 1 8 8 0

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Hermiston****OR 97838**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**\$1,836.43

4.20

**Hospitalist Med. Physicians of Texas**

Nonpriority Creditor's Name

**PO Box 743522**

Number Street

Last 4 digits of account number D P 1 4

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Los Angeles****CA 90074-3522**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**\$220.30**

4.21

**Hospitalist Med. Physicians of Texas**

Nonpriority Creditor's Name

**PO Box 743522**

Number Street

**Los Angeles CA 90074-3522**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **P P 1 4**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

4.22

**Hospitalist Med. Physicians of Texas**

Nonpriority Creditor's Name

**PO Box 743522**

Number Street

**Los Angeles CA 90074-3522**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **2 7 2 9**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

**\$194.09**

4.23

**Mr. Cooper**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 619098****Dallas TX 75261**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **0 9 0 9**When was the debt incurred? **07/03/2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Conventional Real Estate Mortgage**

**\$0.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.24

**\$0.00****Ne Adjusters**

Nonpriority Creditor's Name

**105 Lake Hill Rd**

Number Street

Last 4 digits of account number 7 2 7 9When was the debt incurred? 09/03/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Burnt Hills****NY****12027**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Original Creditor Name: **MEDICAL**

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Unknown Loan Type**

4.25

**\$260.00****North Texas Pathology Associates, PA**

Nonpriority Creditor's Name

**P.O. Box 226**

Number Street

Last 4 digits of account number 0 2 8 7

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Rowlett****TX****75030**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**

4.26

**\$104.00****North Texas Pathology Associates, PA**

Nonpriority Creditor's Name

**P.O. Box 226**

Number Street

Last 4 digits of account number 0 2 8 7

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Rowlett****TX****75030**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$194.00**

4.27

**Online Collections**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1489****Winterville****NC****28590**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 2 7 2 9When was the debt incurred? 02/2020

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Original Creditor Name: HOSPITALIST PHYSICIANS TX**

4.28

**Pioneer Credit Recovery, Inc.**

Nonpriority Creditor's Name

**P.O. Box 500**

Number Street

**Horseheads****NY****14845**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 9 3 0 1

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Collecting for - IRS**

4.29

**Presbyterian of Rockwall**

Nonpriority Creditor's Name

**PO Box 676882**

Number Street

**Dallas****TX****75267-6882**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number 9 7 4 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Medical****\$245.93**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$3,086.95**

4.30

**Progressive Finance/Leasing**

Nonpriority Creditor's Name

**11629 S 700 E St Ste 250**

Number Street

Last 4 digits of account number 2 0 5 3

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Draper****UT****84020**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Lease**

4.31

**Quest Diagnostics**

Nonpriority Creditor's Name

**PO Box 740779**

Number Street

Last 4 digits of account number 9 5 1 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Cincinnati****OH****45274**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

**\$179.68**

4.32

**Quest Diagnostics**

Nonpriority Creditor's Name

**PO Box 740779**

Number Street

Last 4 digits of account number 1 0 7 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Cincinnati****OH****45274**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

**\$98.04**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$108.04**

4.33

**Quest Diagnostics**

Nonpriority Creditor's Name

**PO Box 740779**

Number Street

**Cincinnati****OH****45274**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.34

**Ras Crane, LLC**

Nonpriority Creditor's Name

**10700 Abbott's Bridge Rd. Ste. 170**

Number Street

**Duluth****GA****30097**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.35

**Regional Fin**

Nonpriority Creditor's Name

**3115 S. 1st Street**

Number Street

**Garland****TX****75041**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4 3 0 0**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

Last 4 digits of account number **9 0 0 6**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Attorney for - Mr. Cooper**

Last 4 digits of account number **4 3 0 1**When was the debt incurred? **04/22/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Unsecured**

**\$0.00****\$0.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****\$2,686.82**

4.36

**Rockwall County EMS**

Nonpriority Creditor's Name

**PO Box 863**

Number Street

Last 4 digits of account number 3 8 2 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Lewisville NC 27023-0863**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

4.37

**\$0.00****Synchrony Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 965060**Last 4 digits of account number 9 2 8 4When was the debt incurred? 10/25/2009

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Orlando FL 32896**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Charge Account**

4.38

**\$0.00****Synchrony Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 965060**Last 4 digits of account number 1 5 4 2When was the debt incurred? 10/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Orlando FL 32896**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Charge Account**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.39

**\$0.00****Synchrony Bank / HH Gregg**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 965060****Orlando****FL****32896**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 1 2 7 5When was the debt incurred? 10/1998

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Charge Account**

4.40

**\$0.00****TD Auto Finance**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**

Number Street

**PO Box 9223****Farmington Hills****MI****48333**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 2 6 5 7When was the debt incurred? 02/2006

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Automobile**

4.41

**\$333.69****Texas Health Physicians Group**

Nonpriority Creditor's Name

**P.O. Box 733509**

Number Street

**Dallas****TX****75373-3509**

City

State

ZIP Code

**Who incurred the debt?**

Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number 3 7 9 1

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.42

**\$323.00****Texas Health Physicians Group**

Nonpriority Creditor's Name

**P.O. Box 733509**

Number Street

Last 4 digits of account number **8 0 9 8**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Dallas TX 75373-3509**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**

4.43

**\$1,471.00****Texas Medicine Resources**

Nonpriority Creditor's Name

**PO Box 8549**

Number Street

Last 4 digits of account number **6 6 4 3**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Ft Worth TX 76124-0549**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify  
**Medical**



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$2,742.06</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$3,700.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u><b>\$6,442.06</b></u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$19,334.94</u>
	6j. Total. Add lines 6f through 6i.	6j. <u><b>\$19,334.94</b></u>

Fill in this information to identify your case:			
Debtor 1	<u>Philip</u>	<u>Don</u>	<u>Lovell</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Rhonda</u>	<u>L</u>	<u>Lovell</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b> First Name	<b>Don</b> Middle Name	<b>Lovell</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b> First Name	<b>L</b> Middle Name	<b>Lovell</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 106H

**Schedule H: Your Codebtors**

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No  
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☐ No. Go to line 3.  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☒ Yes

In which community state or territory did you live? **Texas** Fill in the name and current address of that person.

**Rhonda Lovell**

Name of your spouse, former spouse, or legal equivalent

**1623 S HWY 205**

Number Street

**Rockwall**

City

**TX**

State

**75032**

ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b>	<b>Don</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b>	<b>L</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status****Debtor 1**

- ☒ Employed  
☐ Not employed

**Occupation****Pipe Fitter****Employer's name****Total Facility Solutions****Employer's address****1001 Klein Rd. Ste. 400**

Number Street

**Debtor 2 or non-filing spouse**

- ☐ Employed  
☒ Not employed

**Unemployed****Plano**

City

**TX**

State

**75074**

Zip Code

City

State Zip Code

How long employed there? **1 Mth****Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	<b>\$5,699.20</b>	<b>\$0.00</b>
<b>3. Estimate and list monthly overtime pay.</b>	<b>+</b> <b>\$0.00</b>	<b>\$0.00</b>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	<b>\$5,699.20</b>	<b>\$0.00</b>

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	<b>\$5,699.20</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$1,005.81</b>	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c. <b>\$0.00</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d. <b>\$0.00</b>	<b>\$0.00</b>
5e. Insurance	5e. <b>\$0.00</b>	<b>\$0.00</b>
5f. Domestic support obligations	5f. <b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues	5g. <b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: <b>See continuation sheet</b>	5h. + <b>\$149.06</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <b>\$1,154.87</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. <b>\$4,544.33</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <b>\$0.00</b>	<b>\$0.00</b>
8b. Interest and dividends	8b. <b>\$0.00</b>	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <b>\$0.00</b>	<b>\$0.00</b>
8d. Unemployment compensation	8d. <b>\$0.00</b>	<b>\$0.00</b>
8e. Social Security	8e. <b>\$0.00</b>	<b>\$0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <b>\$0.00</b>	<b>\$0.00</b>
8g. Pension or retirement income	8g. <b>\$0.00</b>	<b>\$0.00</b>
8h. Other monthly income. Specify: _____	8h. + <b>\$0.00</b>	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <b>\$0.00</b>	<b>\$0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>\$4,544.33</b>	<b>\$0.00</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. <b>\$4,544.33</b>	<b>\$4,544.33</b> Combined monthly income
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <b>None.</b> <input type="checkbox"/> Yes. Explain: _____		

Debtor 1 **Philip Don Lovell**  
Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

5h. Other Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse
	<u>                    </u>	<u>                    </u>
<b>Edufund</b>	<b>\$79.73</b>	<u>                    </u>
<b>Mkt Recov</b>	<b>\$43.33</b>	<u>                    </u>
<b>Org Fund</b>	<b>\$17.33</b>	<u>                    </u>
<b>Pac Hours</b>	<b>\$8.67</b>	<u>                    </u>
	<b>Totals:</b>	
	<b>\$149.06</b>	<b>\$0.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b>	<b>Don</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b>	<b>L</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

- ☒ No
- ☐ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses****4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.

4. \_\_\_\_\_

**If not included in line 4:**

4a. Real estate taxes

4a. \_\_\_\_\_

4b. Property, homeowner's, or renter's insurance

4b. \_\_\_\_\_

4c. Home maintenance, repair, and upkeep expenses

4c. **\$100.00**

4d. Homeowner's association or condominium dues

4d. \_\_\_\_\_

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Your expenses**

<b>5. Additional mortgage payments for your residence</b> , such as home equity loans	5.	_____
<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	<b>\$300.00</b>
6b. Water, sewer, garbage collection	6b.	<b>\$90.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<b>\$110.00</b>
6d. Other. Specify: <u>Cell Phone</u>	6d.	<b>\$235.00</b>
<b>7. Food and housekeeping supplies</b>	7.	<b>\$600.00</b>
<b>8. Childcare and children's education costs</b>	8.	_____
<b>9. Clothing, laundry, and dry cleaning</b>	9.	<b>\$150.00</b>
<b>10. Personal care products and services</b>	10.	<b>\$150.00</b>
<b>11. Medical and dental expenses</b>	11.	<b>\$350.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<b>\$400.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<b>\$100.00</b>
<b>14. Charitable contributions and religious donations</b>	14.	_____
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<b>\$85.00</b>
15d. Other insurance. Specify: _____	15d.	_____
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a.	_____
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	_____
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	19.	_____
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

21. Other. Specify: **Pet Care/Vet** 21. **+** **\$100.00**

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a. <b>\$2,770.00</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <b>\$2,770.00</b>

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <b>\$4,544.33</b>
23b. Copy your monthly expenses from line 22c above.	23b. <b>– \$2,770.00</b>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <b>\$1,774.33</b>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

**None.**

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b>	<b>Don</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b>	<b>L</b>	<b>Lovell</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 106Sum

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)1a. Copy line 55, Total real estate, from Schedule A/B..... **\$245,240.00**1b. Copy line 62, Total personal property, from Schedule A/B..... **\$23,969.94**1c. Copy line 63, Total of all property on Schedule A/B..... **\$269,209.94****Part 2: Summarize Your Liabilities**

**Your liabilities**  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$157,503.82**3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$6,442.06**3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$19,334.94**

Your total liabilities

**\$183,280.82****Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)Copy your combined monthly income from line 12 of Schedule I..... **\$4,544.33**5. *Schedule J: Your Expenses* (Official Form 106J)Copy your monthly expenses from line 22c of Schedule J..... **\$2,770.00**

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.**\$4,278.52****9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:****Total claim****From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<u><b>\$0.00</b></u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u><b>\$2,742.06</b></u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u><b>\$0.00</b></u>
9d. Student loans. (Copy line 6f.)	<u><b>\$0.00</b></u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u><b>\$0.00</b></u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u><b>\$0.00</b></u>
9g. <b>Total.</b> Add lines 9a through 9f.	<div style="border: 2px solid black; padding: 2px;"><u><b>\$2,742.06</b></u></div>

**Fill in this information to identify your case:**

Debtor 1	<u>Philip</u>	<u>Don</u>	<u>Lovell</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Rhonda</u>	<u>L</u>	<u>Lovell</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X /s/ Philip Don Lovell** \_\_\_\_\_  
Philip Don Lovell, Debtor 1

Date 04/06/2020  
MM / DD / YYYY

**X /s/ Rhonda L Lovell** \_\_\_\_\_  
Rhonda L Lovell, Debtor 2

Date 04/06/2020  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Philip</b> First Name	<b>Don</b> Middle Name	<b>Lovell</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Rhonda</b> First Name	<b>L</b> Middle Name	<b>Lovell</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known) _____			

☐ Check if this is an amended filing

## Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- ☒ Married  
☐ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No  
☒ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$9,360.92</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the last calendar year:</b> (January 1 to December 31, <b>2019</b> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$21,179.72</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> (January 1 to December 31, <b>2018</b> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$98,664.00</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No  
☐ Yes. Fill in the details.

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

- ☐ No. Go to line 7.  
☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.  
☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No  
☐ Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments that benefited an insider.

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

#### **Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No  
☐ Yes. Fill in the details.

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No  
☐ Yes. Fill in the details.

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No  
☐ Yes

#### **Part 5: List Certain Gifts and Contributions**

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

- ☒ No  
☐ Yes. Fill in the details for each gift.

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

#### **Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

☐ No☒ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>Leinart Law Firm</b> Person Who Was Paid		
<b>11520 N. Central Expressway</b> Number Street	<b>03/26/2020</b>	
<b>Suite 212</b>		
<b>Dallas TX 75243</b> City State ZIP Code		

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>DECAF</b> Person Who Was Paid		
<b>112 Goliad St.</b> Number Street	<b>3/26/2020</b>	<b>\$15.00</b>
<b>Fort Worth TX 76126-2009</b> City State ZIP Code		

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>Credit Infonet</b> Person Who Was Paid		
<b>4540 Honeywell Court</b> Number Street	<b>3/26/2020</b>	<b>\$50.00</b>
<b>Dayton OH 45424</b> City State ZIP Code		

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_



Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No  
☐ Yes. Fill in the details.

### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

### Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No  
☐ Yes. Fill in the details below.

Debtor 1 **Philip Don Lovell**Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Philip Don Lovell** \_\_\_\_\_

Philip Don Lovell, Debtor 1

**X /s/ Rhonda L Lovell** \_\_\_\_\_

Rhonda L Lovell, Debtor 2

Date **04/06/2020** \_\_\_\_\_Date **04/06/2020** \_\_\_\_\_Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

---

### This notice is for you if:

- **You are an individual filing for bankruptcy,**  
and
- **Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

### Chapter 7: Liquidation

---

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	<hr/>	
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

---

## Chapter 11: Reorganization

---

	\$1,167	filing fee
+	\$550	administrative fee
	<hr/>	
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

**Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

**Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html).

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**Bankruptcy crimes have serious consequences**

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

**Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

In re **Philip Don Lovell**  
**Rhonda L Lovell**

Case No. \_\_\_\_\_

Chapter 13

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u><b>\$3,700.00</b></u>
Prior to the filing of this statement I have received.....	<u><b>\$0.00</b></u>
Balance Due.....	<u><b>\$3,700.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;



B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**04/06/2020**

*Date*

**/s/ Marcus Leinart**

*Marcus Leinart*  
Leinart Law Firm  
10670 N Central Expwy  
Suite 320  
Dallas, TX 75231  
Phone: (469) 232-3328 / Fax: (214) 221-1755

Bar No. 00794156

**/s/ Philip Don Lovell**

***Philip Don Lovell***

**/s/ Rhonda L Lovell**

***Rhonda L Lovell***

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

IN RE: **Philip Don Lovell  
Rhonda L Lovell**

CASE NO

CHAPTER **13**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 4/6/2020

Signature /s/ Philip Don Lovell  
*Philip Don Lovell*

Date 4/6/2020

Signature /s/ Rhonda L Lovell  
*Rhonda L Lovell*

Attorney General of Texas  
Collections Div/Bankruptcy Sec  
PO Box 12548  
Austin, TX 78711-2548

Capital One  
Attn: Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130

Capital One Auto Finance  
Attn: Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130

Chase Mortgage  
Chase Records Center/Attn: Correspondenc  
Mail Code LA4 5555 700 Kansas Ln  
Monroe, LA 71203

Client Services Inc  
3451 Harry Thurman Blvd  
St Charles, MO 63301-4047

Community Bank  
500 S Morgan St  
Granbury, TX 76048

Comptroller of Public Accounts  
Revenue Accounting/Bankruptcy Div  
PO Box 13528  
Austin, TX 78711

Computer Credit Inc.  
640 West Fourth Street  
Winston Salem, NC 27113

Credit Collection Services  
725 Canton St.  
Norwood, MA 02062

Credit Management, LP  
Attn: Bankruptcy  
PO Box 118288  
Carrollton, TX 75011

Credit Systems International, Inc  
Attn: Bankruptcy  
PO Box 1088  
Arlington, TX 76004

Deville Mgmt  
Attn: Bankruptcy  
PO Box 1987  
Colleyville, TX 76034

Digestive Health Associates of Texas  
7610 Stemmons Freeway  
Suite 500  
Dallas, TX 75247-4251

Fingerhut  
Attn: Bankruptcy  
PO Box 1250  
Saint Cloud, MN 56395

Good Shepard Healthcare  
610 NW 11th St.  
Hermiston, OR 97838

Hospitalist Med. Physicians of Texas  
PO Box 743522  
Los Angeles, CA 90074-3522

Internal Revenue Service  
Centralized Insolvency Operations  
PO Box 7346  
Philadelphia, PA 19101-7346

Leinart Law Firm  
11520 N. Central Expressway  
Suite 212  
Dallas, Texas 75243

Linebarger Goggan Blair et al  
2777 N. Stemmons Frwy, Ste 1000  
Dallas, TX 75207

Mr. Cooper  
Attn: Bankruptcy  
8950 Cypress Waters Blvd  
Coppell, TX 75019

Mr. Cooper  
Attn: Bankruptcy  
PO Box 619098  
Dallas, TX 75261

Ne Adjusters  
105 Lake Hill Rd  
Burnt Hills, NY 12027

North Texas Pathology Associates, PA  
P.O. Box 226  
Rowlett, TX 75030

Online Collections  
Attn: Bankruptcy  
PO Box 1489  
Winterville, NC 28590

Pioneer Credit Recovery, Inc.  
P.O. Box 500  
Horseheads, NY 14845

Presbyterian of Rockwall  
PO Box 676882  
Dallas, TX 75267-6882

Progressive Finance/Leasing  
11629 S 700 E St Ste 250  
Draper, UT 84020

Quest Diagnostics  
PO Box 740779  
Cincinnati, OH 45274

Ras Crane, LLC  
10700 Abbott's Bridge Rd. Ste. 170  
Duluth, GA 30097

Regional Fin  
3115 S. 1st Street  
Garland, TX 75041

Rockwall County EMS  
PO Box 863  
Lewisville, NC 27023-0863

Rockwall County Tax Accessor  
841 Justin Road  
Rockwall, TX 75087-4842

Synchrony Bank  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896

Synchrony Bank / HH Gregg  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896

TD Auto Finance  
Attn: Bankruptcy Dept  
PO Box 9223  
Farmington Hills, MI 48333

Texas Alcoholic Beverage Commission  
Licenses and Permit Division  
PO Box 13127  
Austin, TX 78711-3127

Texas Health Physicians Group  
P.O. Box 733509  
Dallas, TX 75373-3509

Texas Medicine Resources  
PO Box 8549  
Ft Worth, TX 76124-0549

Texas Workforce Commission  
TEC Building- Bankruptcy  
101 E 15th St  
Austin, TX 78778

United States Attorney- North  
3rd Floor, 1100 Commerce St  
Dallas, TX 75242

United States Trustee - Eastern District  
Rm 9C60 1100 Commerce St  
Dallas, TX 75242

Fill in this information to identify your case:				Check as directed in lines 17 and 21:	
Debtor 1	<u>Philip</u> <small>First Name</small>	<u>Don</u> <small>Middle Name</small>	<u>Lovell</u> <small>Last Name</small>	According to the calculations required by this Statement:  <input checked="" type="checkbox"/> 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). <input type="checkbox"/> 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).  <input checked="" type="checkbox"/> 3. The commitment period is 3 years. <input type="checkbox"/> 4. The commitment period is 5 years.  <input type="checkbox"/> Check if this is an amended filing	
Debtor 2 (Spouse, if filing)	<u>Rhonda</u> <small>First Name</small>	<u>L</u> <small>Middle Name</small>	<u>Lovell</u> <small>Last Name</small>		
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>					
Case number (if known)	_____				

Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married.** Fill out both Columns A and B, lines 2-11.

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. <b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	\$4,278.52	\$0.00
3. <b>Alimony and maintenance payments.</b> Do not include payments from a spouse.	\$0.00	\$0.00
4. <b>All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00
5. <b>Net income from operating a business, profession, or farm</b>		
Gross receipts (before all deductions)	\$0.00	\$0.00
Ordinary and necessary operating expenses	\$0.00	\$0.00
Net monthly income from a business, profession, or farm	\$0.00	\$0.00
Copy here →	\$0.00	\$0.00



Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**6. Net income from rental and other real property**

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$0.00</u>		
Ordinary and necessary operating expenses	— <u>\$0.00</u>	— <u>\$0.00</u>		
Net monthly income from rental or other real property	<u>\$0.00</u>	<u>\$0.00</u>	Copy here →	<div style="text-align: center;"><u>\$0.00</u></div> <div style="text-align: center;"><u>\$0.00</u></div>

**7. Interest, dividends, and royalties**

\$0.00

\$0.00

**8. Unemployment compensation**

\$0.00

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: .....↓

For you..... \$0.00

For your spouse..... \$0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$0.00

\$0.00

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_  
 \_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total average monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

<b>\$4,278.52</b>	<b>+</b>	<b>\$0.00</b>	<b>=</b>	<b>\$4,278.52</b>
-------------------	----------	---------------	----------	-------------------

Total average  
monthly income

**Part 2: Determine How to Measure Your Deductions from Income**

**12. Copy your total average monthly income from line 11.** ..... \$4,278.52

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**13. Calculate the marital adjustment.** Check one:

- ☐ You are not married. Fill in 0 below.
- ☒ You are married and your spouse is filing with you. Fill in 0 below.
- ☐ You are married and your spouse is not filing with you.
- Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.
- Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

_____	_____		
_____	_____		
_____	_____	+	
Total.....			<b>\$0.00</b>

Copy here → **\$0.00**

**14. Your current monthly income.** Subtract the total in line 13 from line 12.**\$4,278.52****15. Calculate your current monthly income for the year.** Follow these steps:15a. Copy line 14 here → **\$4,278.52**Multiply line 15a by 12 (the number of months in a year). **X 12**15b. The result is your current monthly income for the year for this part of the form. **\$51,342.24****16. Calculate the median family income that applies to you.** Follow these steps:16a. Fill in the state in which you live. **Texas**16b. Fill in the number of people in your household. **2**16c. Fill in the median family income for your state and size of household..... **\$66,899.00**  
 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.**17. How do the lines compare?**

- 17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).
- 17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**18. Copy your total average monthly income from line 11. **\$4,278.52****19. Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.19a. If the marital adjustment does not apply, fill in 0 on line 19a. **\$0.00**19b. Subtract line 19a from line 18. **\$4,278.52****20. Calculate your current monthly income for the year.** Follow these steps:20a. Copy line 19b **\$4,278.52**Multiply by 12 (the number of months in a year). **X 12**20b. The result is your current monthly income for the year for this part of the form. **\$51,342.24**20c. Copy the median family income for your state and size of household from line 16c. **\$66,899.00**

Debtor 1 **Philip Don Lovell**  
 Debtor 2 **Rhonda L Lovell**

Case number (if known) \_\_\_\_\_

**21. How do the lines compare?**

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Philip Don Lovell** \_\_\_\_\_  
 Philip Don Lovell, Debtor 1

**X /s/ Rhonda L Lovell** \_\_\_\_\_  
 Rhonda L Lovell, Debtor 2

Date 4/6/2020  
 MM / DD / YYYY

Date 4/6/2020  
 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

**Current Monthly Income Calculation Details**In re: **Philip Don Lovell**  
**Rhonda L Lovell**Case Number:  
Chapter: **13****2. Gross wages, salary, tips, bonuses, overtime and commissions.**

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
<b><u>Debtor</u></b>	<b><u>Const &amp; Turnaround</u></b>						
	\$5,513.12	\$8,275.06	\$2,991.62	\$3,311.62	\$0.00	\$0.00	<b>\$3,348.57</b>
<b><u>Debtor</u></b>	<b><u>Total Facility Solutions</u></b>						
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$789.12	<b>\$131.52</b>
<b><u>Debtor</u></b>	<b><u>Falcon Plumbing</u></b>						
	\$0.00	\$0.00	\$0.00	\$0.00	\$1,972.60	\$2,818.00	<b>\$798.43</b>
<b><u>Debtor</u></b>	<b><u>debtor was out of work nov-jan</u></b>						
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>

**Underlying Allowances (as of 04/06/2020)**In re: **Philip Don Lovell**  
**Rhonda L Lovell**Case Number:  
Chapter: **13**

<b>Median Income Information</b>	
State of Residence	<b>Texas</b>
Household Size	<b>2</b>
Median Income per Census Bureau Data	<b>\$66,899.00</b>

<b>National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous</b>	
Region	<b>US</b>
Family Size	<b>2</b>
Gross Monthly Income	<b>\$4,278.52</b>
Income Level	<b>Not Applicable</b>
Food	<b>\$685.00</b>
Housekeeping Supplies	<b>\$72.00</b>
Apparel and Services	<b>\$159.00</b>
Personal Care Products and Services	<b>\$70.00</b>
Miscellaneous	<b>\$302.00</b>
Additional Allowance for Family Size Greater Than 4	<b>\$0.00</b>
<b>Total</b>	<b>\$1,288.00</b>

<b>National Standards: Health Care (only applies to cases filed on or after 1/1/08)</b>	
<b>Household members under 65 years of age</b>	
Allowance per member	<b>\$55.00</b>
Number of members	<b>0</b>
Subtotal	<b>\$0.00</b>
<b>Household members 65 years of age or older</b>	
Allowance per member	<b>\$114.00</b>
Number of members	<b>0</b>
Subtotal	<b>\$0.00</b>
<b>Total</b>	<b>\$0.00</b>

<b>Local Standards: Housing and Utilities</b>	
State Name	<b>Texas</b>
County or City Name	<b>Rockwall County</b>
Family Size	<b>Family of 2</b>
Non-Mortgage Expenses	<b>\$607.00</b>
Mortgage/Rent Expense Allowance	<b>\$1,464.00</b>
Minus Average Monthly Payment for Debts Secured by Home	<b>\$1,509.05</b>
Equals Net Mortgage/Rental Expense	<b>\$0.00</b>
Housing and Utilities Adjustment	<b>\$0.00</b>

**Underlying Allowances (as of 04/06/2020)**In re: **Philip Don Lovell**  
**Rhonda L Lovell**Case Number:  
Chapter: **13**

<b>Local Standards: Transportation; Vehicle Operation/Public Transportation</b>		
Transportation Region	Dallas-Ft. Worth	
Number of Vehicles Operated	2 or more	
Allowance	\$562.00 OVERRIDDEN--Amount Used: \$962.00	
<b>Local Standards: Transportation; Additional Public Transportation Expense</b>		
Transportation Region	Dallas-Ft. Worth	
Allowance (if entitled)	\$217.00	
Amount Claimed	\$0.00	
<b>Local Standards: Transportation; Ownership/Lease Expense</b>		
Transportation Region	Dallas-Ft. Worth	
Number of Vehicles with Ownership/Lease Expense	0	
	<b>First Car</b>	<b>Second Car</b>
Allowance		
Minus Average Monthly Payment for Debts Secured by Vehicle		
Equals Net Ownership / Lease Expense		